

# State of Illinois Certification of Participating Manufacturer

**PM-1** 

P. 1 of 3

Please Review Instructions Prior to Completion.

Part 1: Liability Year and Type of Certification									
Liability Year for this Certification: Complete a separate form for liability year for which you are certifying. (check one)					2011		Other		
Type of Certification: (check one)			Initial		Annual		Supplemental		
Part 2: Manufacturer Ide	entification								
Company Name						FEIN			
Mailing Address									
City	State		Zip Code			Count	Country		
Phone	Fax		Web Address						
Name and title of person completing this form									
Part 3: Designated Cont	act								
Name			Title						
Mailing Address			City, State, Zip						
Phone	Fax		E-mail						
			•						
Part 4: Brand Family Ce	rtification (Attach	Brands A	ddendur	pages	as necessary	y)			
As of the date of this certification performed its financial obligation this certification are a complete of calculating payments under the limit or otherwise affect the State product manufacturer for purpocalculating payments under the state of the st	ns under the Master Se list of the brand familie the MSA in the volume a te's right to maintain that ses of calculating paym	ettlement A es which are and shares at a Brand nent under	greement deemed determir Family co the MSA.	(MSA). I to be it ned purs nstitutes  Asteri	The PM certifes cigarettes (in suant to the MS s cigarettes or sk (*) denotes	fies that the ncluding l SA. Nothin RYO tob	ne brand families RYO product) fo ng in this certific acco of a differe	s listed in r purposes ation shall ent tobacco	
Brand Family	Check	c One	Brand Family			Check One			
	☐ Cigarette	□ RY	)				☐ Cigarette	□ RYO	
	☐ Cigarette	□ RY	)				☐ Cigarette	□ RYO	
	☐ Cigarette	□ RY	)				☐ Cigarette	□ RYO	
	☐ Cigarette	□ RY	)				☐ Cigarette	□ RYO	
	☐ Cigarette	□ RY	0				☐ Cigarette	□ RYO	
	□ Cigarette	□ RY	0				☐ Cigarette	□ RYO	
	□ Cigarette	□ RY	)				☐ Cigarette	□ RYO	
-	□ Cigarette	□ RY	)				☐ Cigarette	□ RYO	
	☐ Cigarette	□RY	o				☐ Cigarette	□ RYO	



# State of Illinois Certification of Participating Manufacturer

**PM-1** 

P. 2 of 3

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Part 5: Illinois Directory Verification					
	Directory Listing for Brand Families (check one)				
	The PM certifies that the brand families listed on the Illinois Directory of Participating Manufacturers posted at <a href="https://www.illinoisattorneygeneral.gov">www.illinoisattorneygeneral.gov</a> are accurate and correct, as is the manufacturer's name.				
	Corrections to the Illinois Directory of Participating Manufacturers posted at <a href="https://www.illinoisattorneygeneral.gov">www.illinoisattorneygeneral.gov</a> are attached.				
	The PM is not listed on the Illinois Directory of Participating Manufacturers.				
	Directory Listing Information for FSC Cigarettes (check one) For each brand style that the Fire Marshal has approved and for which the Attorney General's Office has approved the Brand Family, provide the following information: Brand Style, Size (100 or King), Flavor, Filter (Y/N), and Package (Soft/Box) as it should be listed on the Illinois Directory.				
	The PM certifies that the brand style information for FSC cigarettes listed on the Illinois Directory of Participating Manufacturers posted at <a href="https://www.illinoisattorneygeneral.gov">www.illinoisattorneygeneral.gov</a> are accurate and correct, as is the manufacturer's name.				
	Corrections to the Illinois Directory of Participating Manufacturers posted at <a href="https://www.illinoisattorneygeneral.gov">www.illinoisattorneygeneral.gov</a> are attached.				

# Part 6: Packaging

For each brand family certified in Part 4, provide original packaging for one brand style which is representative of each brand family. Flat empty cartons are preferred. **Submit new packaging each time you change your packaging or add new brand families**. Packaging for FSC products must be provided when changes are made to the packaging or new FSC products are certified for listing and sale in Illinois. Packaging provided for cigarettes certified in Part 4 must reflect compliance with the Cigarette Fire Safety Standard Act (425 ILCS §8/1, et seq.).

Please provide packaging for each brand family certified in Part 4 of the Annual Certification for LY 2011 that contains similar descriptors to light, mild, or low and provide FDA authorization for such descriptors or confirm that no packaging contains such descriptors. See Section 911(b)(2)(ii) and 911(b)(3) of the Federal Food Drug and Cosmetic Act as amended by the Family Smoking Prevention and Tobacco Control Act (21 USC 387k).

## Part 7: Additional Information Requested by Attorney General's Office

All PMs must provide the information requested in this section. Provide a response to each question or indicate N/A. Each attachment must indicate the questions to which it corresponds.

- 1. For each brand family certified in Part 4, provide the following:
  - a. address of the manufacturing plant(s)
  - b. name, address and phone number of the factory manager(s)
  - c. name and address of each Illinois licensed distributor that distributes your brand families. If the brand families certified in Part 4 are made by some entity other than the PM, please provide the name, address and contact name for the fabricator and a copy of any agreement or contract between the fabricator and the PM regarding the manufacture and/or sale of each brand family.
- 2. A copy of your current U.S. Treasury Tobacco Tax Bureau (TTB) permit as a manufacturer and/or as an importer as required by 26 U.S.C. §5712 and §5713. Foreign TPMs should provide importer permits for each company that will import its cigarettes into the United States.
- 3. Name, address and phone number of the Trademark owner and any license agreement or other document providing permission to the PM to use the trademark for each of the brand families certified in Part 4 of the PM-1 certification form.
- 4. For each brand family (cigarettes only) certified in Part 4, provide the name and address of the entity that submitted the ingredient reporting information to the U.S. Secretary of Health and Human Services as required by the Federal Cigarette Labeling and Advertising Act (15 U.S.C. §1335a) and attach copies of all certificates of compliance.



# State of Illinois Certification of Participating Manufacturer

**PM-1** 

P. 3 of 3

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# Part 7: Additional Information Requested by Attorney General's Office

- 5. For each brand family certified in Part 4, provide proof of the submittal to FDA of the disclosure of tobacco product ingredients that was due by June 2010 as required by §904 of the Federal Food, Drug and Cosmetic Act (FFDC) as amended by the Family Smoking Prevention and Control Act (21 USC 387d). Please note that importers or their agents must submit the information to FDA for foreign tobacco product manufacturers.
- 6. For each brand family (cigarettes only) certified in Part 4, provide a copy of the current FTC rotation plan approval letter and the name and address of the entity that filed the health warning rotation plan with the FTC.
- 7. Provide a notarized statement that the brand styles you are attempting to certify are not banned effective September 22, 2009 by the FDA legislation that bans additives, including artificial or natural flavors that are characterizing flavors of tobacco product other than tobacco or menthol. See Section 907(a)(1)(A) of the Federal Food, Drug and Cosmetic Act (FFDC) as amended by the Family Smoking Prevention and Tobacco Control Act (FSPTC).
- 8 Provide documentation that all required payments have been made for all cigarette brands for 2011 pursuant to the Tobacco Transition Payment Program as required by Federal law under The Fair and Equitable Tobacco Reform Act of 2004 (P.L. 108-357).
- 9. If PM intends to sell or authorizes any other entity to sell any cigarettes or roll-your-own by mail order or through the internet, provide the internet website and/or identify publications. Attach copies of all reports, if any, filed with the Illinois Dept. of Revenue to comply with the Jenkins Act (Chapter 10A of Title 15 of the U.S. Code, Section 375 et seq.) for sales in 2010. Attach copies of any agreements authorizing another to sell your brand families by mail order or through the internet.
- 10. Provide a complete list of Little Cigars that PM manufactures.

Springfield, IL 62706

11. Provide a complete list of other tobacco products (e.g. cigars, pipe tobacco, smokeless tobacco, etc.) that PM manufactures no matter where sold; time periods for manufacture of those brands; and the place of manufacture for those brands.

Part 8:	Manufacturer Certification					
	nalties of perjury, I state that, to the documents are true and accurate. <b>7</b>				าy	
Name and Title of Authorized Designee (Print)		Signature of Auth	orized Designee	Date		
Subscribe to me this	ed and sworn s date:					
		Signature of Notary Public				
		County	Commiss	ion expires		
Mail to:	Illinois Attorney General Tobacco Enforcement Bu 500 South Second Street		Phone (217) 785 Fax (217) 524-4		acco)	



# Instructions for Certification of Participating Manufacturer

PM-1

Instructions

## **General Information**

### What is a Participating Manufacturer?

A Participating Manufacturer (PM) is any cigarette (including RYO) manufacturer who has signed on to the tobacco Master Settlement Agreement (MSA).

#### Who must file this Certification?

Any Participating Manufacturer whose cigarettes or roll-yourown tobacco (RYO) were sold in Illinois during the preceding calendar year or who intend for their brands to be listed in the Illinois Directory of Participating Manufacturers. If a brand is not listed in this certification, it will not be listed in the Directory.

It is unlawful to stamp or offer for sale in the State of Illinois any cigarette or RYO brand which is not included in the Illinois Directory of Participating Manufacturers or Directory of Compliant NPMs.

#### When is this Certification due?

An annual certification must be filed with the Attorney General no later than April 30 of each year. An initial certification may be filed at any time.

#### **Updates**

The PM shall update its certification list at least 30 days prior to any addition to or modification of the PM's brand families by executing and delivering a supplemental certification to the Attorney General.

# **Special Instructions**

# Part 1: Liability Year and Type of Certification

- Check appropriate liability year. You must submit a separate certification for each year.
- If "Other" is checked, enter liability year for which certification is being provided.
- Check whether this is an initial (manufacturer is not currently listed on the Illinois Directory), annual (due April 30, 2012 for 2011 sales), or supplemental (change of information provided to the Attorney General.

#### Part 2: Manufacturer Identification

Provide your company name, address, phone and fax numbers, web address, FEIN, and name and title of the person completing the form.

### **Part 3: Designated Contact**

Provide the name, title, address, phone and fax numbers, and e-mail address for the individual the Attorney General should contact with respect to matters relating to this certification. The designated contact is the individual who will receive Attorney General mailings, including the annual certification mailing.

# Part 4: Brand Family Certification

- Brand Family: Provide the brand name, which could include many brand styles (menthol, 100's, etc.) Do not list each style in Part 4.
- Identify each Brand Family of all cigarettes that the PM intends to sell in Illinois, either directly or indirectly through any distributor, retailer or similar intermediary, and seeks to have included in the Directory.
- Indicate by an asterisk (\*) brand families which are NOT certified for sale in Illinois but which are deemed to be its cigarettes for purposes of calculating payments under the MSA.
- · Check whether the product is cigarettes or RYO.
- Where a brand is offered as both cigarettes and RYO, make a separate entry for each.
- A Brands Addendum page is included with the certification packet and is available on the Attorney General's website.
   Copy as needed.

# **Part 5: Illinois Directory Verification**

- Mark the applicable box and provide any corrections for brand families.
- Mark the applicable box and provide listing information for FSC cigarettes, including brand style, size (100 or Kings), flavor, filter (y/n) and package (soft or box) as it should be listed on the Illinois Directory.

#### Part 6: Packaging

- Provide original packaging for one style which is representative of each brand family certified.
- Packaging provided for cigarettes must reflect compliance with the Cigarette Fire Safety Standard Act (425 ILCS §8/1 et seq.)
- Submit new packaging each time you change your packaging or add new brand families.
- Provide packaging for all brand styles that contain descriptors including "light," "mild," or "low" or similar descriptors and provide any approvals of the FDA for such descriptors.

# Part 7: Additional Information Requested by the Attorney General's Office

Provide the information requested. The Attorney General may require a tobacco product manufacturer to submit any additional information including, but not limited to, samples of the packaging or labeling of each brand family, as is necessary to enable the Attorney General to determine whether a tobacco product manufacturer is in compliance with the Escrow Enforcement Act of 2003 (30 ILCS 167/25(d)).

#### Part 8: Manufacturer Certification

The authorized designee executing the certification must be an officer, principal, director or other authorized representative of the manufacturer. The authorized designee's name and title must be legibly printed and the signature must be notarized.